

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.
10/018402

FILING DATE
12 JUN 2002

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		IND.	DEP.	IND.	DEP.	IND.	DEP.
	IND.	DEP.	IND.	DEP.	IND.	DEP.						
1		/					51	/				
2			/				52	/				
3			/				53	/				
4			/				54	/				
5			/				55					
6			/				56					
7			/				57					
8			/				58	-				
9			/				59					
10			/				60					
11			/				61					
12			/				62					
13			/				63					
14			/				64					
15			/				65					
16			/				66					
17			/				67					
18				/			68					
19				/			69					
20				/			70					
21					/		71					
22					/		72					
23					/		73					
24					/		74					
25					/		75					
26					/		76					
27					/		77					
28					/		78					
29					/		79					
30					/		80					
31					/		81					
32					/		82					
33					/		83					
34					/		84					
35					/		85					
36					/		86					
37					/		87					
38					/		88					
39					/		89					
40					/		90					
41					/		91					
42					/		92					
43					/		93					
44					/		94					
45					/		95					
46					/		96					
47					/		97					
48					/		98					
49					/		99					
50					/		100					
TOTAL IND.					/		TOTAL IND.	2				
TOTAL DEP.					/		TOTAL DEP.	2				
TOTAL CLAIMS					/		TOTAL CLAIMS	4				